2 Prison Coversions Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

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From:

Account Name : USACORP INC. Account Number : I20130000019 Phone : (718)362-4789 Fax Number : (718)408-2550

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: ozzimo16@gmail.com

FLORIDA PROFIT/NON PROFIT CORPORATION

Southwest Concrete Polishing Inc.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

2022 NOV -9 AMII: 51

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Corporate Filing Menu

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D. O'KEEFE NOV 1 0 2022 From:17184082550 To:18506176381 Date Time 11/09/22 03:18PM Pages: 3 P: 2/3

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE IL BOLL	CIDAL OFFICE				
ARTICLE II PRINCIPAL OFFICE Principal street address 15044 Sandpiper Ln. Unit 7, Ste 111			Mailing address, if different is: 15044 Sandpiper Ln, Unit 7, Ste 111		
Naples, FL 34114		Naples, F			
ARTICLE III PURI The purpose for which	the corporation is organized is:	Polishing			- 1-
				ix.	2022 NOV
				<u> </u>	9- 10
					- 4
ARTICLE IV SHAP				SF C.F	
The number of shares of				SEE FELORIO	
The number of shares of	of stock is: IAL OFFICERS AND/OR DIRECTORS Gregory Ozzimo, Otficer	Name and Title	<u>:</u>	HASSEE FLORIDI	AH 11: 56
The number of shares of shares of the number of the number of the number of shares of the number	of stock is: IAL OFFICERS AND/OR DIRECTORS Gregory Ozzimo, Otficer	Name and Title			AH 11: 56
The number of shares of shares of shares of shares of share and Times and Times of share and Times of shares of shar	of stock is: IAL OFFICERS AND/OR DIRECTORS Gregory Ozzimo, Officer 201 South Country Rd				AH 11: 56
The number of shares of shares of shares of shares of share and Times and Times of share and Times of shares of shar	of stock is: IAL OFFICERS AND/OR DIRECTORS Gregory Ozzimo, Officer 201 South Country Rd				AH 11: 56
The number of shares of ARTICLE V INIT. Name and Tir. Address	of stock is: IAL OFFICERS AND/OR DIRECTORS Gregory Ozzimo, Officer 201 South Country Rd	Address:			AH 11: 56
The number of shares of ARTICLE V INIT. Name and Tir. Address	of stock is: IAL OFFICERS AND/OR DIRECTORS Gregory Ozzimo, Officer 201 South Country Rd Bellport, NY 11713	Address: Name and Title			AH 11: 56
The number of shares of ARTICLE V INIT. Name and Tit Address Name and Tit	of stock is: IAL OFFICERS AND/OR DIRECTORS Gregory Ozzimo, Officer 201 South Country Rd Bellport, NY 11713	Address: Name and Title Address:	:		AH 11: 56
The number of shares of ARTICLE V INIT. Name and Tit Address Name and Tit	of stock is: IAL OFFICERS AND/OR DIRECTORS Gregory Ozzimo, Officer 201 South Country Rd Bellport, NY 11713	Address: Name and Title Address:	:		AH 11: 56
The number of shares of ARTICLE V INIT. Name and Tit. Address Name and Tit. Address	of stock is: IAL OFFICERS AND/OR DIRECTORS Gregory Ozzimo, Officer 201 South Country Rd Bellport, NY 11713	Address: Name and Title Address:			AH 11: 56

Time 11/09/22 03:18PM Pages: 3 P: 3/3 11/09/2022 15:18 (((H220003837323))) Name and Title: Name and Title: Address _____ Address: ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Cheryl Ozzimo Name: 14320 Neptune Ave Address: Naples, FL 34114 ARTICLE VII INCORPORATOR The name and address of the incorporator is: Gregory Ozzimo Name: 201 South Country Rd Address: Bellport, NY 11713 ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: ___. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate. I am familiar with and accept the appointment as registered agent and agree to act in this capacity /s/ Cheryl Ozzimo 11/9/2022 Required Signature/Registered Agent Date I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

11/9/2022

Date

/s/ Gregory Ozzimo

Required Signature/Incorporator

From: 17184082550 To: 18506176381 Date